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APPLICATION DATA SHEET

Electronic Version v14 Stylesheet Version 1914.

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Citizenship:

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Middle Name:

Family Name:

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Country of Residence:

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State of Mailing Address:

Postal Code of Mailing Address:

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Phone:

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Inventor 2:

Applicant Authority Type:

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Country of Mailing Address: Phone: Fax: E-mail:	NL		
Correspondence Information:	•		
Customer Number:	000116	*000116*	
Application Information:			
Title of Invention: METHOD FOR REINFORCING AN ARTICLE			
Application Type: regular, utility			
Attorney Docket Number:			
Botanic Information:			
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Assignee Information:			